

# 2019 MONTHLY RETIREE RATES

## ALL RETIREES HEALTH INSURANCE

	HMO Plan with Aetna Healthcare	PPO Base Plan administered by United Healthcare	PPO Premier Plan administered by United Healthcare
Retiree only	\$0	\$0	\$70.55
Retiree and Spouse	\$852.80	\$674.26	\$837.91
Retiree and Child(ren)	\$601.74	\$595.47	\$748.23
Retiree and Family	\$1,222.91	\$1,150.52	\$1,379.91

## OPTION FOR RETIREES OVER AGE 65 AND/OR MEDICARE ELIGIBLE

	Medicare Advantage National Service Area PPO Plan with Prescription Plan with United Healthcare	Medicare Advantage Extended Service Area PPO Plan with Prescription Plan with Aetna Healthcare
Retiree only	\$0.00	\$0.00
Retiree and Medicare eligible spouse	\$296.19	\$296.19

\*The rate for retiree on Medicare Advantage Plan and non-Medicare eligible spouse on HMO Plan is \$498.14.

## GAP (GAP CAN ONLY BE USED WITH HMO PLAN)

	Basic GAP Plan through American Public Life with HMO Plan		Advanced GAP Plan through American Public Life with HMO Plan	
	Ages 18-54	Ages 55+	Ages 18-54	Ages 55+
Retiree only	\$35.40	\$65.82	\$130.85	\$208.99
Retiree and Spouse	\$78.55	\$134.34	\$250.36	\$349.12
Retiree and Child(ren)	\$87.74	\$118.46	\$270.69	\$392.06
Retiree and Family	\$136.86	\$192.17	\$396.18	\$537.37

## DENTAL AND VISION

	Dental HMO Solstice S700B-SHP/D1068 with United Healthcare	Dental HMO Solstice S500B/D1067 with United Healthcare	Dental Dual Option DMO/DPPO with Aetna Healthcare	Vision with Aetna Healthcare
Retiree only	\$13.99	\$15.21	\$25.38	\$7.52
Retiree and Spouse	\$24.64	\$27.66	\$47.79	\$13.67
Retiree and Child(ren)	\$24.42	\$26.62	\$47.99	\$16.08
Retiree and Family	\$36.13	\$41.87	\$75.13	\$21.64